



PATENT

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Serial No.: 10/664,385)
Filed: September 17, 2003)
For: RESPIRATORY)
HUMIDIFICATION SYSTEM)
Applicant: GRADON et al.)
Examiner: Not yet assigned)
Art Unit: 3761)
Attorney Ref: 1171/41403/56E-DIV)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 26, 2004.

Tiffany E. Sexton
Tiffany E. Sexton

PRELIMINARY AMENDMENT

Asst. Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

Prior to the examination of the above-identified application, kindly amend the specification as follows:

On page 1 after the title, please add the following sentence:

This application is a divisional application of Serial No. 09/585,867, filed on June 1, 2000, and entitled "Respiratory Humidification System" which is a divisional of United States patent application Serial No. 09/097,832, filed on June 16, 1998, entitled "Respiratory Humidification System" now United States patent number 6,349,722, issued February 26, 2002.



In re application of: Gradon et al.

Serial No.: 10/664,385

Filed: September 17, 2003

For: RESPIRATORY HUMIDIFICATION SYSTEM

MAIL STOP: AMENDMENT
 COMMISSIONER FOR PATENTS
 P.O. BOX 1450
 ALEXANDRIA, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid for
TOTAL	* 33	MINUS	** 33
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			
			Present Extra
INDEP.	* 2	MINUS.	** 3
			0

SMALL ENTITY		OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee	Rate	Addit. Fee
x 9 =	\$.00	x 18 =	\$.00
x 43 =	\$.00	x 86 =	\$.00
+ 145 =	\$.00	+ 290 =	\$.00
TOTAL ADDIT. FEE	\$.00	TOTAL	\$.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Please charge my Deposit Account No. 20-1495 in the amount of \$ _____ . A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.

Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17

Dated: January 26, 2004

Raiford A. Blackstone, Reg. No. 25,156
 Linda L. Palomar, Reg. No. 37,903
 Attorney of Record